

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			10 1-12-01
FORMALITY REVIEW	B.F.	897	03-27-01
RESPONSE FORMALITY REVIEW	105	J.C.C.B.	05/06/01

## INDEX OF CLAIMS

✓ ..... Rejected .N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	N	Date
1				
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3				
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28				
29				
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31				
32	✓	✓	✓	
33				
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35				
36				
37				
38				
39			✓	
40			✓	
41				
42	✓	✓	✓	
43	✓	✓		
44				
45				
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48				
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If more than 150 claims or 10 actions  
staple additional sheet her

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